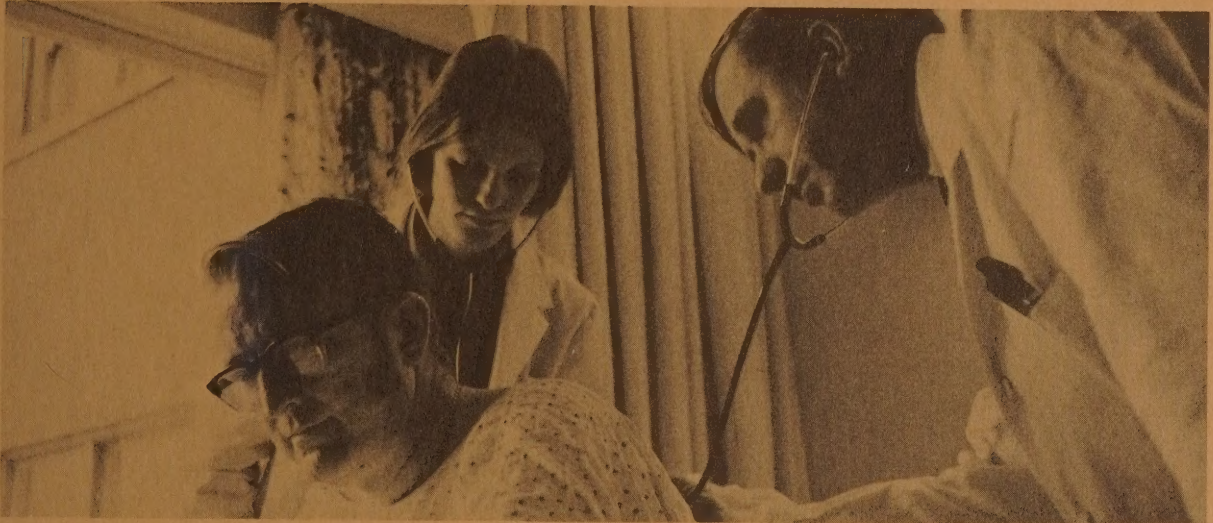
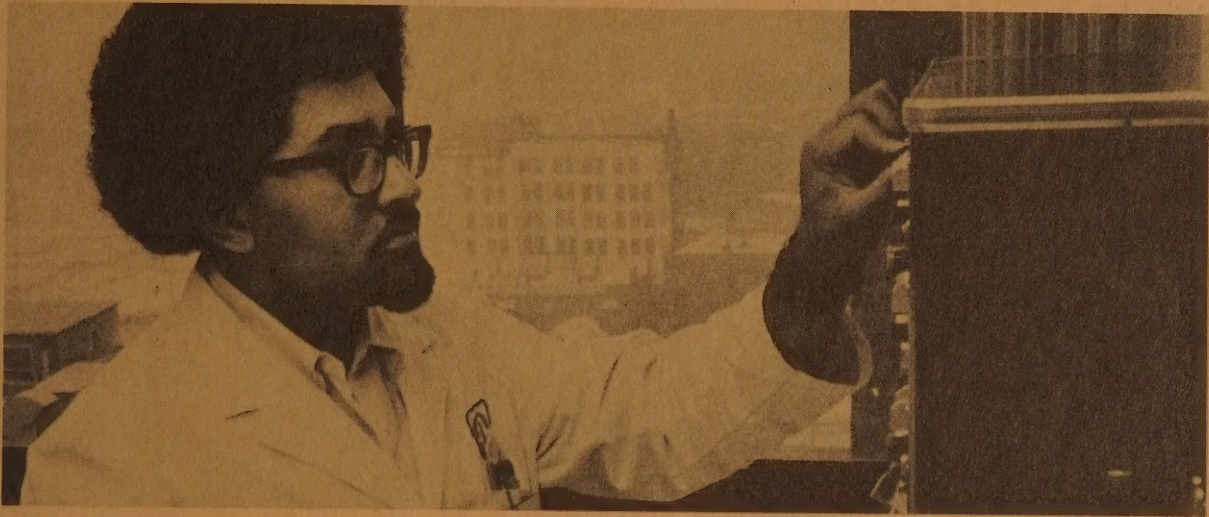


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Alumni Association of Rush Medical College
Volume 6, Number 1, Spring 1972



New Rush generation views its place in medical practice



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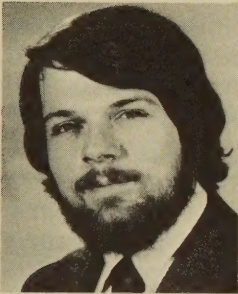
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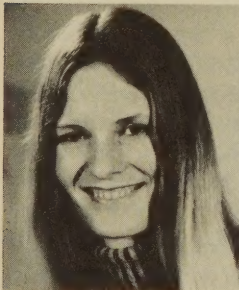
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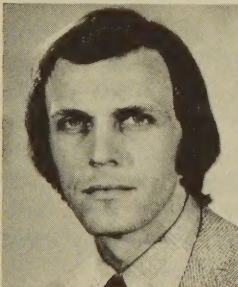
Gary L. Simpson



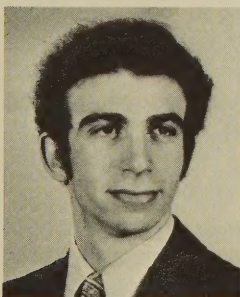
Robert L. Cavens



Rita O. Pucci



Ronald W. Quenzer



Steven E. Sicher

The preservation of a personal, doctor-patient relationship, the need for a workable health delivery system, and the fear of governmental control are some of the problems on the minds of Rush medical students. The first students to enter Rush Medical College in 30 years arrived last September. Ninety-nine students are enrolled in two classes — 66 first year and 33 third year.

Recently, five students met with John S. Graettinger, M.D., associate dean for student and faculty affairs, to discuss their views of the medical profession and where they relate to it. These students are a sampling and are not meant to reflect the thoughts of the entire class. We thought, however, that the alumni might be interested in what is on the minds of some of the latest Rush generation.

Gary L. Simpson, 25, is a native of Fairfield, Illinois. He received a bachelor of science degree in microbiology and a master of science degree in molecular biology at the University of Illinois at Champaign. He is also working toward a doctorate in molecular biology. Gary is married.

Robert L. Cavens, 34, born in Manhattan, Kansas, but most of his life has been spent in Chicago. Although he has pursued a science major at a number of colleges, he has not received an undergraduate degree. He worked as a medical laboratory technician for five years. At the Chicago Board of Education, he served as a parent coordinator, a job that combined the responsibilities of a social worker, probation officer, truant officer, and street youth counsellor. Bob is single.

Rita O. Pucci, 27, received a bachelor of science degree in biology from the University of Illinois Chicago Circle campus. She was a James Scholar and a member of Alpha Lambda Delta national honor society. She lists carpentry and electrical wiring as her special skills. She is married and the mother of two.

Ronald W. Quenzer, 26, lived in Osborne, Kansas through high school. He received a bachelor of arts degree in zoology from the University of Kansas. He was attending the College of Osteopathic Medicine and Surgery in Des Moines, Iowa prior to enrolling as a third year student at Rush. He is married and his wife is a medical technologist.

Steven E. Sicher, 23, is a native of New York City. He received a bachelor of arts degree from Harvard University. He has worked as a counsellor at a camp for emotionally disturbed children and as an orderly at Saranac Lake General Hospital and Boston State Mental Hospital. He was a member of the Harvard drama club and wrote for the Harvard Lampoon. He is single and his father is William Sicher, of the Rush class of 1940.

Below: Steven Sicher prepares a class presentation on the heart in the Rush model room.

Opposite page: Bob Cavens observes the muscular action of the hand and wrist in a Rush physiology laboratory.



Dean Graettinger: First of all, maybe we can establish how some of you came to enter medical school. Bob, you are the oldest. Why did you wait until you were 34 to set out to become a physician?

Bob Cavens: Well, I didn't just decide to become a doctor. I decided roughly 17 years ago while in high school. Unfortunately, my economic situation forced me to pursue my education anywhere and everywhere. I have been trying to get into medical school for about seven years. It has been only within the last two years, however, that positions for Black students have opened up.

My initial motivation was an awareness of the acute need for conscientious physicians to serve the Black community. Then I realized that all poor people are experiencing a health care crisis. There aren't enough physicians and, in many cases, medicine in poor communities is being played by ear. In anger me and I want to do something about it.

Steve Sicher: I probably decided to enter medicine during college. A lot of things went into the decision. I was looking for a profession which would not be a nine-to-five job. One that would be emotionally and intellectually involving on many levels. One that gave me a "gut" reaction. I probably decided for reasons of my own satisfaction as well as those of being able to help anyone.

Rita Pucci: I don't have one reason that I can put my finger on. Challenge and curiosity played a big part in the decision. Also, the self-satisfaction that you can get out of medicine was important.

Ron Quenzer: Such a decision is arrived at after a long sequence of events that occur as you are growing up. I'm sure an empathy toward people and the security and respect that the profession engenders are reason for the decision. People look for common characteristics. The question of "why did you do it" probably causes more self-analysis among medical students than any other question. I'm not sure it's even relevant.

Gary Simpson: I think our problem in not being able to articulate why we came to medical school centers around our lack of exposure to the field before we get here. You can try being a short order cook, or working in business, or working on a highway construction job. But it is very difficult to actually experience the satisfactions, joys and depressions of a physician.

I was fortunate enough prior to graduate school to take a "preceptorship" with a physician in my hometown, Fairfield, in southern Illinois. It gave

me a chance to find out what a small town practice is like. It was one experience that "turned me on". There was nothing else that I really wanted to do. I felt that this was the kind of physician that I wanted to be and nothing else would be as fulfilling.

Dean: What do you see as the physician's role in society? Where do you think you fit in?

Gary: I can only speak from the very limited experience I have had with medicine. A small community practice seems to yield an incredible amount of satisfaction. The physician fills a role that no other person can. The people in the community where I worked looked upon the family doctor as father confessor, spiritual help, lawyer and psychiatrist.

Ron: I have a real struggle going on within me between practicing in a small or rural community and spending the remainder of my career in a teaching and research center. I spent my life through the 12th grade in the small town of Osborne, Kansas. Since that time I haven't been back very often and I'm beginning to feel comfortable in big city surroundings. I think physicians tend to migrate toward areas in which they feel comfortable.

A small town medical practice almost frightens me. I think it requires a much finer clinician. In a medical center, we learn to rely upon the sophisticated, diagnostic equipment that is particularly available in this setting.

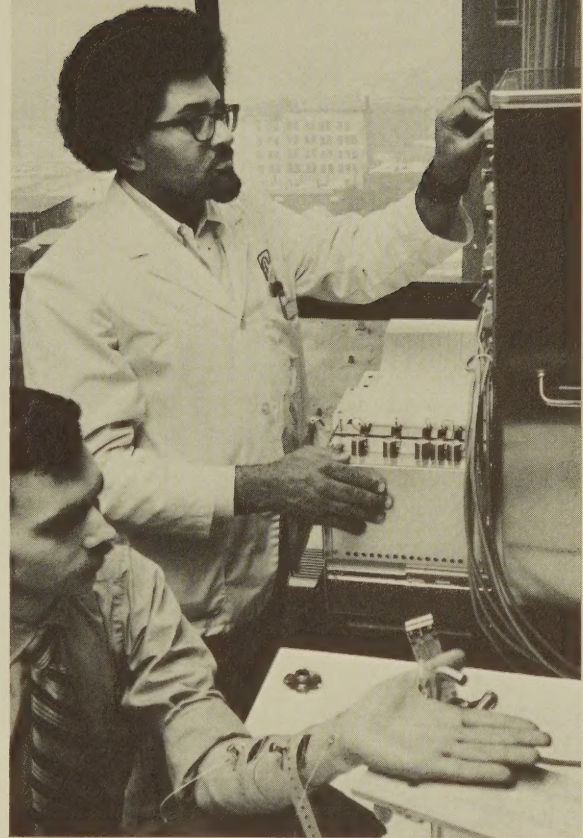
Rita: I agree. As a first year student having so much complexity thrown at me, I realize how much I would have to be responsible for on my own. If I were to follow my original plan to practice small town medicine, I would have to make certain that I had some sort of back-up from a larger medical center.

I think there has to be greater communication between centers with sophisticated equipment and local doctors. Also, there has to be some incentive to attract more physicians to these small communities.

Steve: Being from New York, my concerns are more with the kind of care people are getting in a big city whether it is delivered by a private practitioner or through a large medical center.

More and more, I think that the private practitioner working alone cannot offer urban populations the variety of services they require. On the other hand, the large medical center can offer these services, but it is harder for the individual patient to get to them.

I see myself working cooperatively with professionals of different disciplines, such as social



workers, nutritionists, and psychologists. Hopefully, we will be working in a setting that is easily accessible to the people.

Dean: In the last 30 to 40 years, we have seen a dramatic shift of this country's population from rural communities to the cities. Today, people are living in denser concentrations and medical knowledge and machinery are becoming more complex. Is it still important that the individual physician be looked upon as a professional advocate who carries on a continuous relationship with his patients?

Gary: I think there is a reasonable parallel between medicine and the aerospace industry. As the people in the National Aeronautics and Space Agency began working on the moon shots, they discovered that they needed the services of a great number of highly specialized people. Soon it became apparent that someone else was needed to integrate all of the expertise and information that these specialists had. So they created a new position known as project director to correlate the work of all of the specialists.

I think the family physician has the same job. He must be a patient advocate. He must be the person who can relate the work of the specialists to the individual patient.

Steve: I agree that the patient seems to be getting lost, but I don't think that the physician necessarily needs to be the patient advocate. Certainly the doctor is vital to patient care, but, possibly, he isn't the best person to integrate the activities of the various disciplines which affect the health of the individual.



Rita: I am not sure who but a physician could handle the integration you are talking about. A medical education is necessary in order to diagnose a person's problem. Who but a physician can understand symptoms and diseases?

Steve: Well, it may take something more than the standard medical education. It may take an education that includes a knowledge of sociology, demographics, or political science, as well as medicine. I think it may take a knowledge that doesn't exist in a formal program as yet.

Dean: Steve, you won't deny that the doctor image is a very important one, will you? He is the one person in our society who is permitted to violate a person in every respect, as the law states. With that prerogative goes the expectation that he will use all of this information for good. Do you see that role being played by someone other than a physician?

Steve: It just seems to me that there are so many services that are vital to a person's health, ranging from housing to education to any number of areas, that it isn't quite practical that the physician should be held responsible for them all.

Bob: I agree with Steve. I think that the responsibility of taking care of a patient's body is so great that I don't have the capacity or time to be concerned with every other relevant area. That should be someone else's job.

In a small community it may be possible for a doctor to take care of a patient's total needs, but in a large city, I'm afraid, you might be spreading your responsibilities over too great an area. Something is going to be caught short. It's better

to do one thing well than two things fairly well.

Dean: The charge has been leveled that medicine is the last of the "cottage industries". It is said that the doctor is an individual entrepreneur and that he has created a non-system of medical care. Do you think this is true? If so, what is the physician's role in correcting this situation?

Rita: I think it's evident that too many people are not getting medical care, facilities are being needlessly duplicated, and gaps in service do exist. If the medical profession doesn't come up with a system of health delivery, I think the federal government will. We must think of integrating people and doctors, doctors and community hospitals, hospitals and major medical centers.

Steve: One of the major problems in talking about systems is that we sometimes lose track of the fact that all of our work must revolve around the patient who is really only an individual. Also, we have to try to get people to go to the doctor before they become acutely ill, or we do not solve the problem.

Dean: I know that you are aware that we are attempting to develop a prototype of a workable health delivery system here at Rush. It's being built from the community level. It begins with the patient and the private physician's office, moves on to the community or neighborhood hospital, and is linked directly to a large medical center and teaching institution. We are attempting to give the patient an accessible point of entry into the system and at the same time upgrade the quality of care by offering the physicians in the system a continuing educational program.

Now, let's look at your roles as students in affecting changes in the health delivery patterns of this country. Can you or should you be taking part in these changes now?

Bob: I think it behooves every one of us to become involved. In the past, students have worked toward getting their degree then they went out to practice in their own little community or in their own highly specialized field. They didn't worry about how their actions affected the overall health problem. They tended to work in isolation. As a consequence, medical science has grown by leaps and bounds while health service has retrogressed on a national scale.

Ron: I think that many students and young physicians are committed to working on the health delivery system today. Many established physicians are beginning to practice in groups so that a variety of services are available in one location. They are becoming involved with their communities. I think the profession is becoming concerned with the vast problems involved in delivering health care to an ever-growing population.

Gary: We must become involved as students. If we find excuses now for not getting involved, we will find the same excuses five or ten years from now. I think it takes a commitment and an act of participation at every level of our education and on into our practice.

Dean: But what can you as students do to become involved?

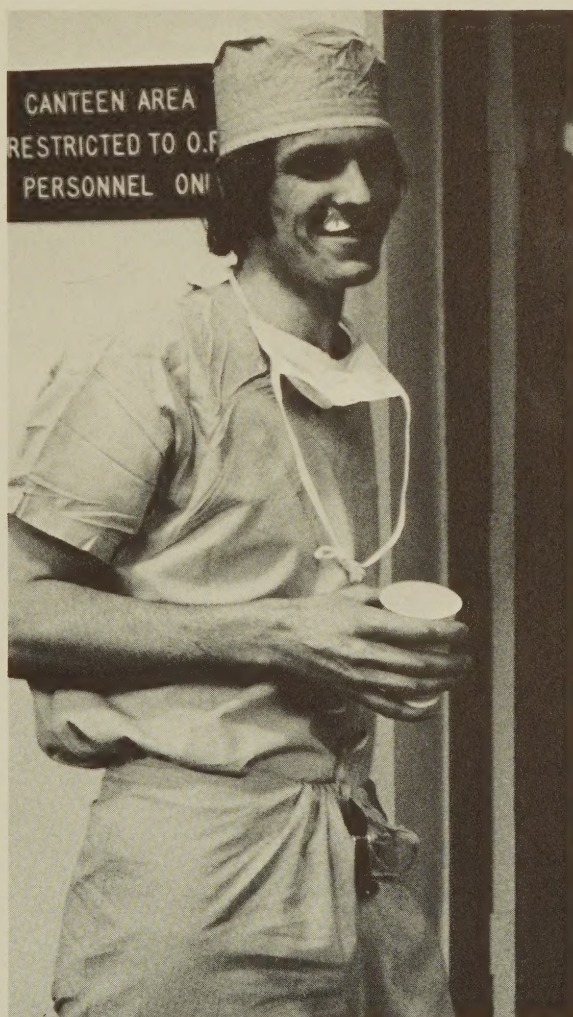
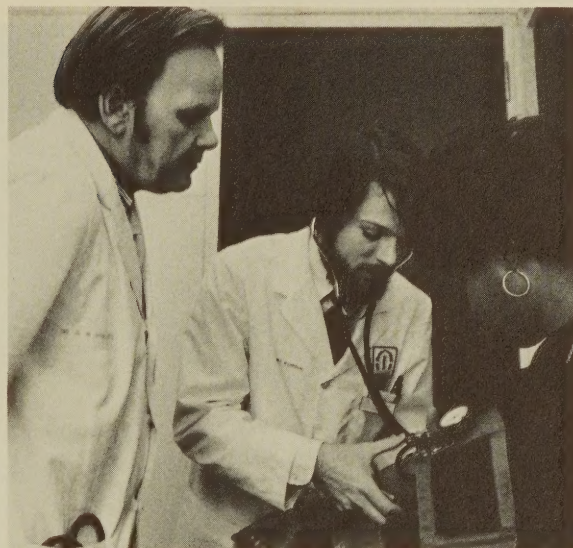
Steve: There are many levels we can work on. We can work with the Student American Medical Association (SAMA) or, if we are more liberally inclined, the Medical Commission for Human Rights. We can volunteer our time at free clinics. We might even work for political candidates who express our views toward health care.

Bob: If we don't get involved now. If we make excuses for our lack of interest, I'm afraid we will have to live with the results of our procrastination for years to come. The possibility of governmental intervention gets greater every day. We owe it to ourselves and our future to become involved and to learn as much as possible about the actual practice of our profession while we are students. After all, medical students are going to have to live with the decisions that are being made today when we are in practice tomorrow. It's our ball and we have to carry it.

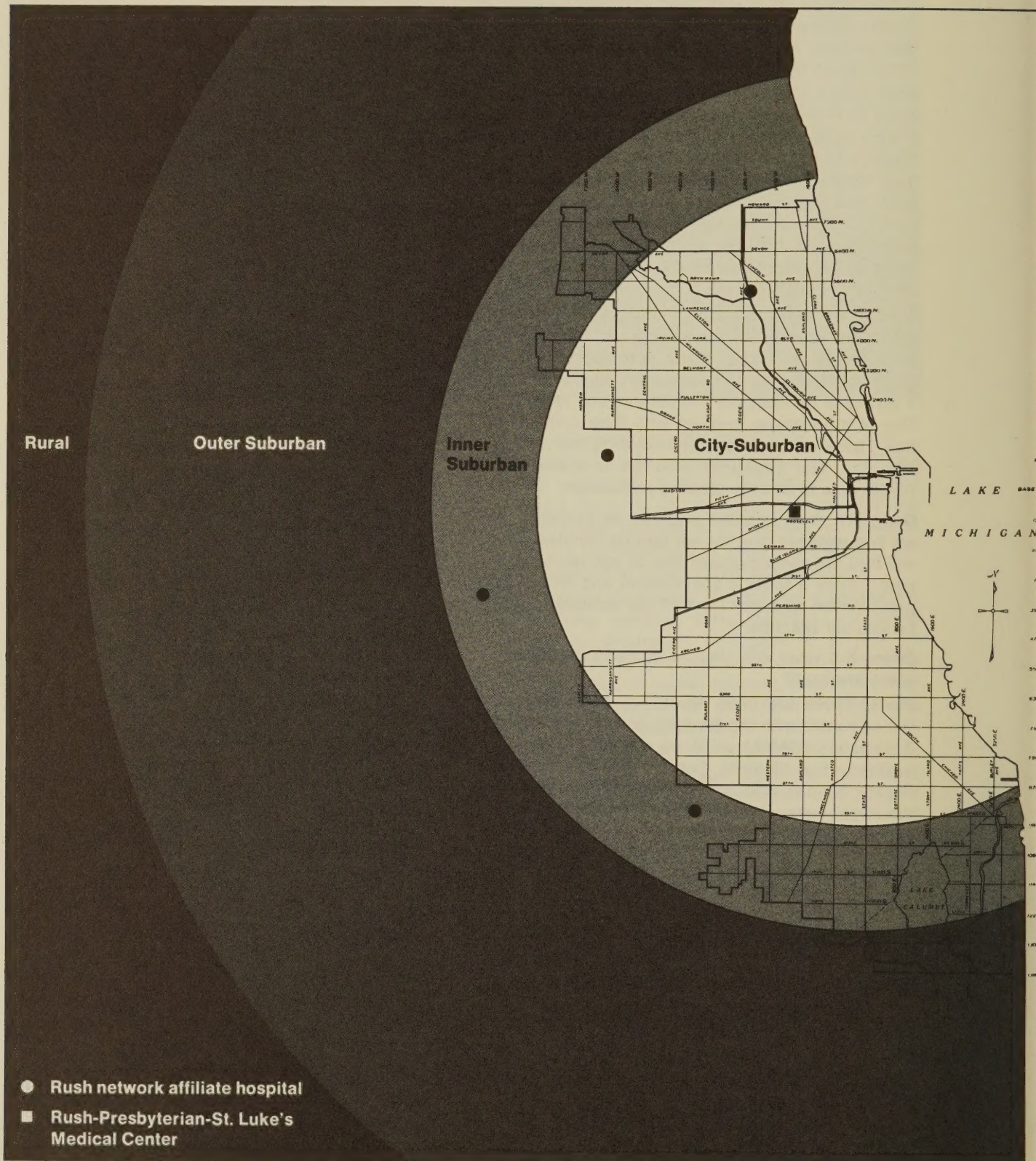
Dean: That seems to be a good note on which to end our discussion. Thanks for sharing your views with us.

Opposite page: Rita Pucci, a first year student, makes rounds with her clinical tutor Thomas Coogan, Jr., M.D. A tutor spends at least two hours each week exposing his student to medical practice.

This page, top: Gary Simpson gets some experience in the private office of his clinical tutor A. William Holmes, M.D. Bottom: Third year student Ron Quenzer takes a break during his surgical clerkship.



The Rush network of hospitals will provide coordinated health care for as many as 1.5 million people. The hospitals will be located in urban, suburban and rural communities and service people of all socio-economic levels. The four hospitals now part of the Rush network are indicated below.



Rush network formed to coordinate health care of 1.5 million people

Affiliation agreements have been signed between four community hospitals and Rush-Presbyterian-St. Luke's Medical Center. The agreements mark the first step in the development of a health care network designed to serve 1.5 million people, to provide primary care training experiences for Rush Medical College students, and to develop top-notch internship and residency programs.

Hospitals included in the system are Swedish Covenant Hospital on Chicago's northside, Christ Community Hospital in the southwest suburb of Oak Lawn, West Suburban Hospital in the western suburb of Oak Park, and Community Memorial General Hospital in the western suburb of La-Grange. It is expected that six additional hospitals will be added to the network during 1972.

The Rush network now includes 2,283 beds. The goal is to have 3,500 to 4,000 beds located in communities representing a geographical, ethnic and economic cross-section. Future additions will include hospitals from the distant Chicago suburbs and rural communities.

The hospitals which make up the Rush network are being selected for the manner in which they reflect the actual practice of medicine and their location in respect to the health care needs of Illinois.

"The Rush network is being thought of as a functional system rather than a rigid, geographical area. We hope that the cooperation and interaction of the network hospitals will close the gap between patient care and medical education," says Mark H. Lepper, dean and executive vice president for professional and academic affairs at Rush-Presbyterian-St. Luke's Medical Center.

Dr. Lepper refers to the Rush network as the third educational laboratory of the 20th century. He explains:

"The first third of the century saw the development of the university-based biological laboratory. The second third brought the development of the university-affiliated referral hospital as a laboratory for teaching clinical human biology and medicine. Now we hope that we are developing a third laboratory to bring students back to where 99 percent of the action is—back to the community and the people. We want to develop a concern for the individual's health as well as his disease."

Rush students will be assigned to network hospitals for two to three month periods. Under the direction of physicians working in the communities and holding Rush faculty positions, the students will be exposed to family-oriented and community-type practices.

Dr. Lepper points out, "All too frequently medical students are trained almost exclusively in the rarified atmosphere of the referral care hospital. They have little opportunity to come into contact with the excitement of family practice and the excitement of rendering primary care in a community.

"It is our purpose to correct this situation. We want to show them that their teachers in the community hospitals are enormously rewarded by caring for the sick and by rendering preventive and rehabilitative care in a community setting."

The retention of physicians by the State of Illinois is another problem that the network program hopes to attack. The State, which ranks fifth in population and fourth in per capita income, ranks 15th in its ratio of patient care physicians to population.

A survey of more than 1,300 graduates of Illinois medical schools showed that only 30 percent remained to practice in the State.

Dr. Lepper suggests, "Illinois is losing young physicians to other states primarily because they are not performing their internships and residencies in the State. In 1971, Illinois filled only 32 percent of its internships compared to the national average of 50 percent per state. These figures show the need for better postgraduate programs at the community hospital level."

The network hospitals and Rush will strive to upgrade residency and continuing education programs. Where members of the network do not have accredited residencies, Rush will assist them in developing new programs.

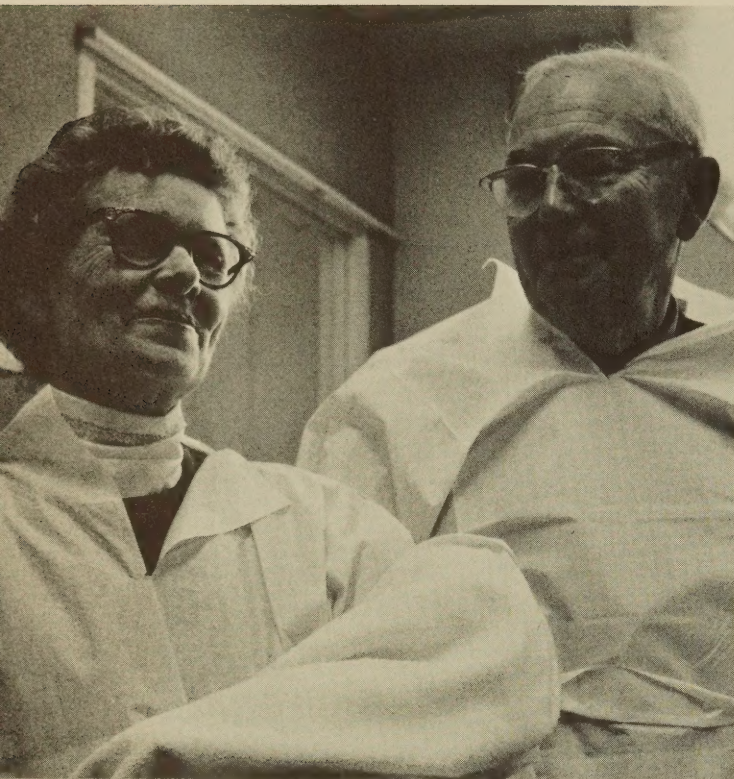
Member hospitals will have the opportunity of rotating residents through the network. For instance, it is likely that Presbyterian-St. Luke's residents interested in family practice would rotate through the accredited family practice residency currently in existence at West Suburban Hospital.

All staff members of network hospitals will have the opportunity of participating in the Rush faculty.

The first four hospitals to join the Rush network reflect the type of institutions with which Rush alumni have chosen to affiliate. Twenty-eight alumni hold staff positions at the hospitals.

Christ Community Hospital

Operated by the Evangelical Hospital Association, Christ Community Hospital has 615 beds and 74 bassinets. Plans are underway for the addition of 200 more beds. It serves the southwest Chicago suburb of Oak Lawn. Opened in 1961, the hos-



Although officially retired from the staff of Swedish Covenant Hospital, Gordon L. Rosene '22 still occasionally visits the obstetrics and gynecology department where he once set records for the number of babies delivered. Mrs. Rosene is a registered nurse and also served on the staff of the hospital.

pital's postgraduate program includes accredited residencies in surgery, obstetrics and gynecology, and pathology. The hospital also serves as clinical training base for the Evangelical School of Nursing and training programs in physical therapy, inhalation therapy, licensed practical nursing, and laboratory technology. The specialized facilities at the hospital include: an intensive care and cardiac unit, an inpatient psychiatric unit, and a special care unit offering intensive rehabilitative services.

Rush alumni holding staff positions at Christ Community Hospital include: Alfred D. Biggs '22, Harms W. Bloemers '37, Ian H. Bond '28, Sam S. Chrisos '40, Theodore H. Gasteyer '31, Rudolph P. Leyers '34, Louis A. Sass '39, Armin F. Schick '32, and Vernon W. Schick '29.

Community Memorial General Hospital

Opened in 1955, Community Memorial General Hospital is a 276 bed facility serving the western suburb of LaGrange, Illinois. The hospital has no accredited residency program. It has a medical staff of 153 physicians and 14 dentists who care for

approximately 10,000 inpatients a year. Community Memorial offers clinical nursing training for associate degree and degree programs in association with the College of DuPage, Northern Illinois University and Morton Junior College. It also conducts programs in licensed practical nursing and x-ray technology. The hospital recently completed a \$7 million expansion program providing new facilities for outpatient and emergency rooms, radiology, central service, inhalation therapy and physical therapy, medical records, cardiac care, operating rooms and surgical beds, and a cardio-pulmonary laboratory.

Until his recent retirement, Paul H. Van Verst '29 was a member of the Community Memorial General Hospital staff.

Swedish Covenant Hospital

Founded in 1886, Swedish Covenant Hospital serves Chicago's northside. The hospital has 236 beds, an approved internship program, and residencies in pathology and general practice. It operates a four year nursing program in affiliation with North Park College and a physical therapy program in association with Northwestern University. In 1968, it opened a cardiac and intensive care facility. Recently a community care facility was opened to provide outpatient services.

Rush alumni who have served on the Swedish Covenant staff include Herman Meyer '28, Gordon L. Rosene '22, and Ralph G. Willy '16.

West Suburban Hospital

Located in the suburb of Oak Park, Illinois, West Suburban Hospital has 386 beds and a medical staff of more than 150. It has an approved internship program and residencies in radiology, pathology, orthopedics, and family practice. In association with Wheaton College, it offers a diploma program in nursing education. The hospital also operates schools of radiologic technology and medical technology. In 1970, construction was completed on an \$8 million, seven-story addition. New facilities include: laboratories, radiology, intensive care and recovery rooms, 28-bed nursing unit, surgical unit, offices, and cafeteria and gift shop.

Rushmen on the West Suburban staff include: Joseph S. Angell '37, Allison L. Burdick, Sr. '21, Craig D. Butler '19, Effie M. Ecklund '37, Garland W. Ellis '22, Frederick H. Falls '10, Kenneth T. Hubbard '42, Ruth Hughes '34, Morris H. Jones '26, William B. Knox '21, Catherine E. Logan '33, Harry A. Oberhelman '21, Robert F. Sharer '31, Eugene Traut '20, Paul Van Verst '29, Harold C. Voris '30.

Top: In the library of Christ Community Hospital, some alumni on the hospital staff include (left to right) Armin F. Schick '32, Louis A. Sass '39 president of the staff, Harms W. Bloemers '37, Alfred D. Biggs '22, Sam S. Chrisos '40, and Theodore H. Gasteyer '31.

Bottom: Sixteen Rush alumni hold positions of the staff of West Suburban Hospital. A few of them photographed in that hospital's chemistry laboratory around the Bone Analyzer are (left to right) Morris H. Jones '26, Catherine E. Logan '33, Ruth Hughes '34, Craig D. Butler '19, Kenneth T. Hubbard '42, Allison L. Burdick, Sr. '21, and Chester B. Thrift '34.



The Rush College of Nursing and Allied Health Sciences will admit its first students in Fall of 1973. Under the Rush charter, the new college will offer degrees up to a doctorate of nursing sciences and certificate and baccalaureate degrees in allied health sciences.



Rush announces College of Nursing and Allied Health Sciences

Dean Luther Christman offers view of program's direction

Rush has entered upon a new phase in its development with the announcement of a College of Nursing and Allied Health Sciences to be established at Rush-Presbyterian-St. Luke's Medical Center. It is expected that the first undergraduate students will be admitted in the Fall of 1973.

The College will offer programs leading to certificate and baccalaureate degrees in allied health sciences and degrees up to a doctorate of nursing sciences. Such degrees can be granted under the original Rush Medical College charter which was issued in 1837.

Luther Christman, Ph.D., has been named dean of the newly formed college and director of nursing affairs for Rush-Presbyterian-St. Luke's Medical Center. Dr. Christman is currently dean and professor of nursing at Vanderbilt University School of Nursing (Nashville, Tennessee), professor of sociology at that university's College of Arts and Sciences, and director of nursing at Vanderbilt University Hospital. He will assume his duties at Rush on July 1.

The educational programs of the new College will be totally integrated with the health delivery system of the Medical Center. Students will train in the laboratories and classrooms of Rush Medical College as well as the patient care areas of Presbyterian-St. Luke's Hospital.

While at Vanderbilt, Dr. Christman was instrumental in reorganizing the nursing school's curriculum and administration and doubling the size of its faculty and student body.

His philosophy of nursing education emphasizes the importance of practical experience taught by a clinical faculty. Classroom theory must be made to relate directly to patient care.

He speaks of training nurses as applied scientists. He believes that a nurse must be aware of the effect that the critical sciences (physiology, sociology, and psychology, etc.) have upon the management of people in distress. As a scientist, the nurse must translate knowledge to practice. To assist nurses in doing so, Dr. Christman suggests that science courses should be co-taught by the scientist and nurse practitioner.

"I would hope that our students will realize that nursing is a life-long process. Nursing education does not end with a degree and a license," says Dr. Christman.

Although statistics show that it takes about six nursing and allied health professionals to support every practicing physician, Dr. Christman does not think that the estimated national short-

age of 50,000 primary physicians means a corresponding lack of 300,000 nursing and allied professionals.

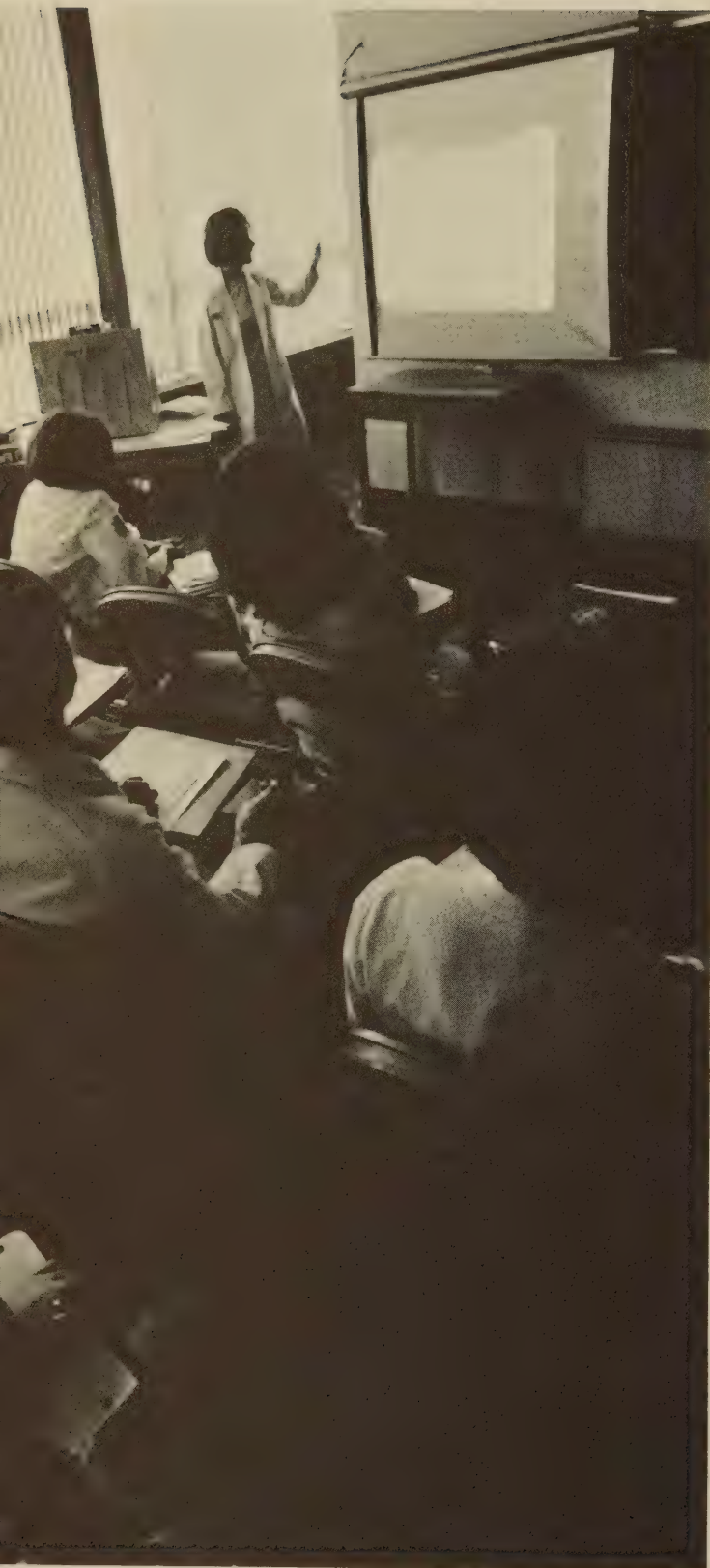
He cites a study he conducted while at Michigan State University which showed nurses at most hospitals spend 75 percent of their time performing non-clinical activities. If nurses were used more appropriately, he believes 75 percent more nursing man hours would be available to patients without an increase in the number of available nurses.

"I think that what we are short of is quality not quantity. We don't have enough nursing and allied health practitioners trained at a quality level."

"Nurses have watered down their practice with too many poorly trained people doing patient care jobs. It has helped create only mediocrity in nursing care and the patients have suffered."

Luther Christman, Ph.D., has been named dean of the College of Nursing and Allied Health Sciences. He is currently dean of the Vanderbilt University School of Nursing.





Dr. Christman thinks that the present and future emphasis upon illness prevention and health maintenance will lead to a decrease in the number of hospitalized patients and possibly the number of hospitals. New emphasis will be placed upon the health care worker in the community.

Nurses and allied health personnel should be trained so that they can assist the physician from a community base as well as a hospital base. Their education should permit them to function with a certain amount of independence. A nurse practitioner, he says, should have some training in physical diagnosis and therapeutic management.

He cites the problem of attracting physicians to small and rural communities and states that the nurse might be the key to providing better health care for these communities. He indicates that many nurses already live in these communities. If properly trained, they could work in association with a staff of physicians in a distant medical center to provide continuing care.

Last summer at Vanderbilt, Dr. Christman's staff participated in an experiment in which a member of the nursing faculty was located in an Appalachian community as a nurse practitioner. She communicated via telephone with distantly located physicians.

When she experienced a problem beyond her experience, she communicated via telephone hotline with her physician back-up. She was able to receive an immediate and good consultation on the management of the problem without jeopardizing the patient, the physician, or herself.

The addition of closed circuit television, telephone transmitted electrocardiograms and facsimile equipment could be the beginning of a new network of health delivery.

In the allied health field, Dr. Christman points out the present problems of establishing common curriculum and standards on a national basis so that trained personnel may practice in any medical setting.

Presently, some allied health workers will be accepted only by the institution which has trained him. Other institutions have no basis for determining his qualifications to practice.

Dr. Christman hopes that by working cooperatively with the Rush network hospitals he can create suitable criteria for both vertical and horizontal mobility.

The new College of Nursing and Allied Health Sciences is one more step in the Rush program to establish a workable health delivery system which can provide outstanding health care for as many as 1.5 million people.

Classnotes '04-'19

Morrell, Joseph R. '04 (Ogden, Utah) reports that he is 92 years old and in reasonably good health. He retired in 1945. In 1956, he returned to practice as chief of the medical branch of the U.S. Army Depot in Ogden. He retired for the second time in 1968.

Hopper, Claire D. '06 (Cottonwood, Arizona) reports that he lost his right hand in an automobile accident in May 1971.

Green, John W. '08 (Vallejo, California) is president of the 50 year Club of American Medicine.

Rooks, James T. '10 (Bellevue, Washington) writes that he is in reasonably good health and is enthusiastically looking forward to the celebration of his 100th birthday in 1977. He still lives with his first and only wife of over sixty years.

Smith, Clifford '10 (DeKalb, Illinois) visited the new Rush Medical College recently with his grandson, Chris, who is attending Ripon College as a sophomore. Chris is considering applying to Rush upon graduation.

Jones, William S. '15 (Menominee, Michigan) is practicing ophthalmology with his son who specializes in E.N.T. He and his wife, a former Presbyterian Hospital nurse, have three children, 11 grandchildren and six great grandchildren.

Mitchell, Claude W. '16 (Silver Spring, Maryland) reports that he retired from active practice in 1955 and as Chairman of the Board of Citizens Building and Loan Association in 1970. He is now enjoying his summers at Lake Mousam, in Springvale, Maine, and his winters at El Rancho Village in Bradenton, Florida.

Lebensohn, James E. '17 (Chicago, Illinois) reports that our alumni directory is only semi-correct. He is emeritus in nearly all his connections but still maintains a private practice. He is active in the eye department of Hines Veterans Administration Hospital, and currently, associate editor of the American Journal of Ophthalmology.

Caylor, Harold D. '18 (Bluffton, Indiana) reports that he is still in active practice.

Classnotes '20-'29

Counseller, Virgil S. '20 (Scottsdale, Arizona) retired from practice in June 1971.

Severeide, Albert L. '20 (Portland, Oregon) has spent much of his time playing golf since retiring last August. At last count, he had scored six "holes-in-one."



Allison L. Burdick, Sr. '22 (left) visits with his son, Allison, Jr., who is director of the West Suburban Hospital family practice residency. The two doctors are admiring a photo of young Allison's daughter who is a registered nurse on the West Coast.



William B. Knox '21 is a member of the active staff of West Suburban Hospital in Oak Park, Illinois. The hospital is part of the Rush network. Dr. Knox lives in Forest Park, Illinois.

Walters, Waltman '20 (Rochester, Minnesota) received an honorary membership in the Czechoslovak Medical Society from that country's ambassador at the Czech embassy in Washington, D.C. In March he hosted a Rush dinner for the alumni in the Tucson area and in April, he plans on attending the American Surgical meeting in San Francisco.

Curry, James F. '21 (Chicago, Illinois) completed 51 years as a physician for the Illinois Central Railroad and Hospital Association.

Eversoll, Norton J. '21 (Hollywood, Florida) retired from active practice in St. Louis, Missouri in 1962. He lists horticulture as his chief hobby and maintains an orchard of rare tropical fruit trees. He is active in many civic organizations including the Greater Hollywood Chamber of Commerce. He is also a past president of the Association of Retired Doctors of Medicine of Broward County, Florida.

Gallagher, William J. '21 (Manteno, Illinois) retired from Manteno State Hospital in January. He has been associated with the hospital since 1952 and has served as its director since 1969. He intends to continue as a part-time consultant while in partial retirement.

Langley, Robert W. '21 (Rancho Santa Fe, California) just finished his autobiography and has been told that it is publishable. It recounts his first two years at the University of Oregon Medical School and completion at Rush, his internship at Los Angeles General, and the establishment of the Beverly Hills Medical Clinic.

Mulsoy, Frederick W. '21 (Cedar Rapids, Iowa) was 89 years old last October. He is now living at the Merth-Wick Manor, a home for senior citizens.

Castaing, Pedro '22 (Ponce, Puerto Rico) writes that he is partially retired from active practice.

Keir, Floyd E. '22 (Phoenix, Arizona) retired as chief of urology at Englewood Hospital in Phoenix. He and his wife, Gertrude, live in the midst of a three acre citrus grove. Their daughter, Alice, is married to Superior Court Judge Donald Froeb of Arizona.

Weston, Frank L. '23 (Madison, Wisconsin) is now an emeritus professor of medicine at the University of Wisconsin.

Watson, Allen S. '23 (Glen Ellyn, Illinois) retired to Florida in June 1970.

Behn, Walter M. '24 (St. Petersburg, Florida) retired from active practice and is now residing in Florida. He originally was a native of Wheaton, Illinois.

Bercovitz, Zacharias '24 (La Jolla, California) practiced medicine in New York until six years ago when he moved to La Jolla. His experience as a medical missionary in Korea and his education at the London School of Tropical Diseases, has made it possible for Dr. Bercovitz to author a book on tropical diseases.

Quaintance, Paul A. '24 (Los Angeles, California) has retired from his surgical practice after 41 years in the Los Angeles area. He and his wife are now trying apartment living and liking it increasingly, although "we do miss our garden and flowers." However, "the freedom from worry we now enjoy, whenever we wish to travel, compensates very well."

Proctor, David T. '25 (Altadena, California) reports that we were in error by writing in the last issue of the BULLETIN that he was a urologist. It is rather his son, David, who is now practicing urology in Anaheim, California after a five year residency at Billings Hospital. Dr. Proctor, Sr., took his internship and residency at Presbyterian Hospital in internal medicine with special emphasis on chest diseases and allergies. He is now retired. Dr. Proctor's father was a Rush graduate of 1896 and his wife, Mary, is a Presbyterian Hospital nursing graduate.

Wilson, Arthur N. '25 (Ketchikan, Alaska) is in active practice with his son, James A., in general surgery. His younger son, Arthur N., Jr., is practicing internal medicine in Ontario, Oregon. A number of Rush graduates have spoken at Alaskan State medical meetings in recent years including **Erroll Rawson** '26, **Lester Dragstedt** '21, and **George Callahan** '26.

Henke, Harold E. '26 (Montebello, California) reports that friend, classmate, and former partner **Ernest Clay** '26 is living in Paradise, California after retiring in September 1971.

Leader, Samuel A. '26 (Chicago, Illinois) is doing consulting diagnostic radiology and routine diagnostic radiology at the DuPage County Tuberculosis Clinic. He is also emeritus associate professor of radiology at the University of Illinois College of Medicine.

Mc Donald, Angus C. '26 (Downey, California) retired about three years ago. He reports that he is

busier than ever with civic duties. He is also chairman of the board of Disciples Seminary Foundation in Claremont, California.

Pulsifer, Libby '26 (Rochester, New York) says that he is happy to be in active practice of internal medicine and gastroenterology. He has 12 grandchildren and a golf handicap of 18.

Vanstane, Virgil R. '26 (Chillicothe, Missouri) In November 1971 retired from medical practice and moved back to the area where he and his wife were born and reared. He reports that they are now becoming what one might call "at most settled" there.

Wakeman, J. Newton '26 (Springfield, Missouri) reports that his son, Newt Jr., began his practice in Springfield on January 1 of this year. Before practicing he interned at Illinois Research Hospital (Chicago), spent 2½ years in the Navy Air Corps as a flight surgeon, and held a four year orthopedic residency at Parkland Memorial Hospital, Dallas, Texas.

Compere, Edward L. '27 (Elmonte, California) retired as professor and chairman of the Department of Orthopaedic Surgery at Northwestern University Medical School in January, 1971. Now living in Southern California he is involved in practice with the Medical Center of El Monte Hospital and Clinic.

Fox, Ruth '27 (New York, New York) received the National Council on Alcoholism Silver Key for outstanding contributions to council work. She is a member of the Board of NCA and its medical advisory committee.

Miller, Wilfred S. '27 (Assumption, Illinois) reports that his general practice has changed to a geriatrics specialty. "I don't hurry or work too hard except when I have to."

Stericker, George B. '27 (Springfield, Illinois) has retired from his practice of internal medicine. He says, "It is good to know that Rush Medical College is to resume activity again."

Taylor, Van W. '27 (Bonne Terre, Missouri) was honored by the Bonne Terre Chamber of Commerce in November.

Bond, Ian H. '28 (Chicago, Illinois) is feeling well despite some surgery during 1971. He is still practicing obstetrics.

Jordan, Edwin P. '28 (Charlottesville, Virginia) is about 50 percent retired. He has been doing some writing. He has three children, two have Ph.D.'s

and one a Master's degree. He also has seven grandchildren.

Felsher, Isaac M. '28 (Hallandale, Florida) recently moved to Florida after retiring from his dermatology practice in February 1971. He is an emeritus associate professor of dermatology at Northwestern University Medical School and an inactive senior attending dermatologist at Michael Reese Hospital.

Perlstein, Minnie Oboler '28 (San Jose, California) is now practicing dermatology in California after 41 years in Chicago. She has three children and eight grandchildren.

Ratner, Reuben '28 (Beverly Hills, California) travelled with his wife on the Internal Postgraduate Medical Foundation tour of South America and the Galapagos Islands in January. He also attended the 50th reunion of his premedical class at Stanford University.

Vandermyde, Isaac '28 (Morrison, Illinois) is in general practice with his son, Richard. He has three children and nine grandchildren.

Carder, Bryan J. '29 (Berwyn, Illinois) is still in active general practice. He has six children and 21 grandchildren. His eldest son, Bryan, Jr., is a dermatologist and his youngest, Jonathan, is attending Harvard Business School. His daughters are all college graduates, married, and raising families. His hobby is fishing, coin collecting, and dabbling in petroleum products.

Mc Master, Paul E. '29 (Beverly Hills, California) reports that he is now past president of the Western Orthopedic Association, currently vice president of the American Orthopedic Association, and Senior Consultant in Orthopedic Surgery at the U.S. Veterans Hospital in West Los Angeles.

Ream, Milton '29 (Oakland, California) retired in June 1970.

Classnotes '30-'39

Patchen, Paul J. '30 (Chicago, Illinois) has been retired since February 1970.

Doty, Horace W. '31 (Salt Lake City, Utah) has eight grandchildren and has retired twice because of "old age." He served in the Army for three wars. He saw combat with the infantry and artillery in two of the wars.

Seron, Zaven '31 (Fresno, California) writes he is 73 and "still going strong." He has now limited his practice to "house calls" only.

Stackhouse, Stirling P. '31 (Rome, New York) re-

ports that his second son, James, is a pre-med student at St. Lawrence University in Canton, New York. He hopes that he will someday be a Rush graduate.

Wallach, Robert '31 (New York, New York) was recently appointed clinical professor of medicine at the University of Puerto Rico.

Benson, George '32 (San Angelo, Texas) is now working at the Center for Mentally Retarded in Texas.

Cowen, Jack P. '32 (Chicago, Illinois) was invited by the International Eye Foundation last September to participate in an inspection and survey of medical teaching teams and hospital facilities in Afghanistan and Iran. He also investigated the international shipment of donor eye tissue. Dr. Cowen has been a delegate to the International Congress of Ophthalmology.

Johnson, Arvid T. '32 (North Palm Beach, Florida) retired to Florida in 1969. He and Mrs. Johnson are enjoying life in the South. Son, David, is a successful neurologist in Santa Ana, California. He is a graduate of Northwestern University and Mayo. Son, Donald, works with DuPont. Son, Thomas, has been training with the Ford Motor Company and will represent that company in Latin America. He received a Medal of Commendation from the Army for his work in Panama with the School of the Americas. Dr. Johnson says that he is anxious to hear from his classmates and welcomes their visits when in Florida.

Williams, Mark F. '32 (Buffalo, Minnesota) was recently made an honorary life member of the South Dakota Medical Association. He retired because of a heart condition.

Byrne, Robert C. '33 (Hatfield, Massachusetts) reports that two of his four sons are physicians. Richard is a graduate of the University of Vermont Medical School and currently at Letterman General Hospital in San Francisco. David is also a Vermont graduate and is at the U.S. Public Health Service Hospital in Barrow, Alaska.

Gilbertsen, Cecil R. '33 (Janesville, Wisconsin) reports that his son, James, is a member of the trombone section of the Chicago Symphony.

Mc Allister, Ralph G. '33 (DeKalb, Illinois) has practiced medicine and general surgery in DeKalb since 1933. He is a member of the DeKalb Medical Center. In 1937, he married Verna Ann Boget. His son, Robert, is a Colorado real estate broker and has been active in the development of the Marble ski area. The McAllisters vacation at their home in Manzanillo, Mexico.

Newman, Louis B. '33 (Chicago, Illinois) was honored in December by the Chicago Loop Synagogue at the State of Israel Bond testimonial banquet. Dr. Newman is a member of the Board of Directors of the synagogue. He is also consultant in rehabilitative medicine to the Veterans Administration hospitals and to several Chicago community hospitals.

Gustafson, Carl H. '34 (Youngstown, Ohio) says "I've never known any medical school with the spirit and reverence of Rush. Those days were wonderful. I hope the younger generation catches the spirit of cooperation and work." He is looking forward to seeing more alumni at the annual meeting in June.

Woolpert, Oram C. '34 (Columbus, Ohio) reports that he is now retired.

Brown, Leo R. '35 (Gary, Indiana) is in general practice. He has two children and one grandson.

Carbone, Joseph A. '35 (Gary, Indiana) is a pediatrician at Ross Clinic in Gary. He is chief of the pediatric department and an instructor at St. Mary's Mercy Hospital. He is also a new grandfather. Mrs. Carbone sends along her "best wishes."

Frank, William P. '35 (Alhambra, California) is senior attending physician at Los Angeles County-University of Southern California Medical Center. At Ingleside Mental Health Center, he is presently holding two appointments — chairman of the Joint Conference Committee, and First Vice President of the Board of Directors for 1972. He is also an associate clinical professor of medicine at USC medical school. A member of the Executive Committee of the Los Angeles County Medical Association and a delegate to the California Medical Association House of Delegates, he still finds time for his four grandchildren.

Helpern, Herman G. '35 (New York, New York) reports that his daughter, Dr. Joan Goldberg, graduated from Harvard Medical School in 1970. She is now assistant resident in medicine at the New England Medical Center. She is married to Alfred Goldberg, Ph.D., an associate professor of physiology at Harvard Medical School.

Sesit, Myron F. '35 (New York, New York) retired from the United States Army reserve with the rank of Colonel in 1965 after 35 years. He is currently senior medical examiner in aerospace with the Federal Aviation Administration. He has been associate attending visiting physician with Bellevue, French Polyclinic, and University hospitals.



Six of the trustees who kept the Rush Medical College charter active during the 30 years of suspended operations attended the opening day ceremonies for the reactivated school. They included (seated left to right) R. Kennedy Gilchrist '31, Frank B. Kelly, Sr. '21, William J. Hagenah H'68, (standing left to right) Robert M. Potter '39, Bertram G. Nelson '36, and Frederic A. dePeyster '40.



Chester T. Johns '39 (right) recently visited Rush-Presbyterian-St. Luke's Medical Center. He dropped in on his friend **W. David Steed**, associate professor of psychiatry (Rush) and attending psychiatrist (Presbyterian-St. Luke's Hospital). Dr. Johns practices internal medicine in Santa Cruz, California.

Since 1945, he has been assistant professor of clinical medicine at New York University Medical Center.

Krafchik, Louis L. '36 (New Brunswick, New Jersey) is chief of pediatrics at Middlesex Hospital. He and his wife have two daughters and two granddaughters.

Lennette, Edwin H. '36 (Oakland, California) has been appointed to the advisory committee of the East African Virus Research Institute at Entebbe, Uganda and to the World Health Organization working team assigned to the institute. Dr. Lennette also attended the ceremonies at the White House witnessing President Nixon's signing of the National Cancer Act of 1971.

Neukamp, Frank '36 (Connersville, Indiana) visited Dr. and Mrs. Ken Madsen at their Shell Lake, Wisconsin, lakeside cottage.

Simison, Carl '36 (Barnesville, Minnesota) reports that his son was declared the World's No. 1 run-about speedboat racing driver.

Shubitz, Simon M. '36 (North Hollywood, California) reports that his daughter, Susan Marilyn, is a graduate of the University of Southern California and is a Los Angeles public school teacher. She recently became engaged to Isaac Shubich, M.D., who practices E.N.T. in Mexico City. Dr. Shubich recently completed the examinations for certification by the American Board of Otolaryngology.

Weber, Joseph E. '36 (Milwaukee, Wisconsin) has been in private psychiatric practice in Milwaukee since 1946. He sends his regards to his classmates.

Bush, Louis '37 (Baldwin, New York) is a member of the Board of Directors and chairman of the Committee on Environmental and Public Health of the American Academy of Family Practice. He is also a diplomate of the American Board of Family Practice.

Greenman, Robert B. '37 (Kearny, Arizona) is now enjoying the warm Arizona climate after retiring from the Navy with 30 years of service. He is working at Kennecott Hospital with **Weir C. Stevens**, also a Rushman of 1937.

Gunderson, Harvey C. '37 (Toledo, Ohio) is an assistant clinical professor of surgery (otolaryngology) at the Medical College of Ohio at Toledo.

Mindrup, Robert G. '37 (Jerseyville, Illinois) reports that his son, Bruce, is taking pre-med at Texas Christian University. He hopes that he will become a second generation Rushman.

Siegel, Ralph '37 (Perth Amboy, New Jersey) fondly recalls his classes with Dr. Pernokis. "He was a dedicated teacher of medicine, researcher in hematology, and an inspiration to a generation of Rush students."

Vos, Bert J. '37 (McLean, Virginia) has been working part-time as a consulting pharmacologist since his retirement from the Food and Drug Administration in 1970.

Friedman, Morris S. '38 (South Bend, Indiana) is in private practice in orthopedic surgery and on the staff at Memorial and St. Joseph Hospitals in South Bend and Mishawaka respectively. His oldest son, Sheldon, is a resident in internal medicine at Indiana University in Indianapolis and his wife, Sheryl, is a freshman in medical school at Indiana University.

**Commemorative seal in
observance of the reactivation
of Rush Medical College**



A limited edition of the traditional Rush Medical College seal has been struck in bronze in observance of the College's reactivation. The handsome seal 2½" in diameter is suitably inscribed on the reverse side with the date of the reactivation.

To obtain your memento of this important occasion, please send a check in the amount of \$10.00 payable to:

The Alumni Association
of Rush Medical College
1725 West Harrison Street
Chicago, Illinois 60612

Linn, Louis '38 (New York, New York) is a clinical professor of psychiatry at Mount Sinai School of Medicine. His daughter, Judith Ann, is married to a young hematologist Dr. Michael Stemerman. They have a three year old son. His son, Robert, is married and is currently attending the University of Chicago Law School.

Schurmeier, Frederick A. '38 (Elgin, Illinois) is in active general practice. He has two daughters and two grandchildren. One of his daughters is a nurse.

Ellsworth, P. Blair '39 (Idaho Falls, Idaho) was elected a trustee of Kiwanis International at its international convention in San Francisco last June.

Classnotes '40-'42

Behrents, E. Gordon '40 (Galesburg, Illinois) attended the Alumni Homecoming in November. He hopes that the reactivated Rush will provide some help for the Galesburg Clinic now under construction.

Farley, Otis R. '40 (Eugene, Oregon) and his wife, Margaret, retired from their respective physician and schoolteacher roles in 1970. They moved to Eugene from Washington, D.C.

Kaplan, Henry S. '40 (Stanford, California) is the first holder of the Maureen Lyles D'Ambrogio Chair of Medicine at Stanford University School of Medicine. Plans to retire as chairman of radiology in June. He was the 1969 recipient of Atoms for Peace Award and the Robert Roesler de Villiers Award for achievements in leukemia research in 1971.

Pickering, Paul P. '41 (San Diego, California) presided over a symposium for cosmetic surgery of the nose at the 40th annual meeting of the American Society of Plastic and Reconstructive Surgeons, Inc.

Wichman, John W. '41 (Sparks, Nevada) retired from the USAF Medical Corps in June 1970. He has since returned to his former residence in Reno, Nevada and has hung out his shingle as a GP in Sparks, Nevada.

Logan, Arch H. '42 (Spokane, Washington) recently visited Rush with his son Bruce.

Ross, Bernard D. '42 (Fort Pierce, Florida) has been practicing cardiology and internal medicine. His son, Gordon, received a Ph.D. in microbiology from the University of Miami in 1971. Son, Larry, is a sophomore at the University of Maryland Dental School.

Phoenix and Tucson groups meet to hear of new Rush

Arizona alumni from the Phoenix and Tucson areas gathered on March 1 and 2 to renew old acquaintances and hear about the new Rush Medical College.

The Phoenix meeting was held at Scottsdale's Camelback Inn and was arranged by R. Lincoln Kesler '35. When illness prevented Dr. Kesler from attending the meeting as part of his vacation, the alumni director James Stack substituted for him. Ten alumni and their wives attended.

Waltman Walters '20 and his wife hosted a dinner meeting at Tucson's Skyline Country Club, where he spends his winter months. Eighteen alumni and their spouses attended the meeting.

Top: In Phoenix, alumni met at the Camelback Inn of Scottsdale. Among those attending dinner were (left to right) Mrs. Floyd E. Keir, Dr. Keir '22, E. Henry Running '35, Zeph Campbell, Mrs. Louis Newton, Dr. Newton, Angus J. DePinto '34. Drs. Campbell and Newton took their internship and residency training at Presbyterian-St. Luke's Hospital.

Bottom: In Tucson, alumni met at the Skyline Country Club to hear about Rush. Those attending included (left to right) William Steen, who attended Rush for two years and whose father attended Rush, Mrs. Lewis Woodruff, Dr. Woodruff '27, Mrs. Steen, Murray C. Eddy '26, Mrs. Elbert E. Munger, Dr. Munger '25, Mrs. Eddy, Henry C. Goss '34, Martha D. Goss '34, Henry P. Limbacher, Mrs. Waltman Walters, William Butler '17, Mrs. Limbacher, Waltman Walters '20, and Mrs. Butler.



Pediatrics becomes a Texas specialty as career of "Little Doc" Kaliski grows

"Little Doc" is what they call him. The nickname fits perfectly. Sidney Kaliski '21 rises to the height of 5 feet one inch and weighs all of 110 pounds.

Now 76 years old, Dr. Kaliski has been at the center of the pediatrics practice in San Antonio, Texas, for more than 50 years. He became that city's first pediatrician in 1921. Today, he is president of the medical and dental staffs of Bexar County Hospital District and teaches pediatrics at the University of Texas Medical School.

Dr. Kaliski came to Rush Medical College after receiving his undergraduate training in Texas. He recalls that his family doctor was a Rush graduate.

"After my father's death when I was 13, Dr. Winefield became a surrogate father to me. I admired him very much and wanted to become the same kind of doctor. So Rush was the logical choice for a medical school," says Dr. Kaliski.

"Little Doc" returned to San Antonio in 1921 after completing his internship and residency in pediatrics at Cook County Hospital. During the early years, business was slow. The pediatrics specialty was then accepted only in northern and eastern cities.

"This community could see no reason why they should take their children to a special doctor when the family doctor had always done the job before," recalls Dr. Kaliski.

Receipts for his first year of practice were only \$1,500. In order to stay alive, he continued to live at home with his mother. He did not marry until he was 47 years old.

With free time on his hands, "Little Doc" would pay visits to the local police station. He made friends with many of the force and often accompanied them on patrols. After his practice picked up, he continued to follow his hobby.

"Going out with the police was an escape from days filled with nothing but women and children," says Dr. Kaliski.

"Little Doc's" size and avocation led to his being involved in the capture of an escaped murderer in 1927.

The man, John "Pete" McKenzie, killed the San Antonio chief of detectives during a street shoot out. Dr. Kaliski had the opportunity to ride along on the manhunt. McKenzie was found hiding in an attic and suffering from leg wounds.

A small trap door in the ceiling of the bathroom was the only way to reach him. The opening was too small for the police to fit through so they asked their small friend to go up after the killer.

First, McKenzie was told to throw down his gun and then warned not to harm Dr. Kaliski. Then "Little Doc" climbed through the trap door and dragged the wounded man out.

As the police carried McKenzie away, Dr. Kaliski noticed that the gunman's right hand was dangerously close to one of the policemen's revolver. Not taking a chance, he walked behind them with his pistol aimed at the man's head.

"I was determined that if he decided to go for the officer's gun and try for one more shoot out, I was going to let him have it." Doc recalls. Eventually the man was tried and convicted.

When Dr. Kaliski's life was not filled with the excitement of "cops and robbers," he was active in making pediatrics an accepted specialty in the Texas community. He started as chief pediatrician at San Antonio's Santa Rosa Hospital and then became active in founding that city's Children's Hospital. He also served as consultant to all of the major military installations in the area.

As a member of the Bexar County Medical Society, he founded and served as the first president of the San Antonio Pediatric Society. Later, he was elected president of the Texas Pediatric Society and, in 1971, received that organization's distinguished service award.

He is a staunch advocate of the private practice of medicine. While opposing governmental control over the practice, he feels that the medical establishment must take the initiative toward reducing health care costs.

He warns, "If doctors don't adapt, I'm very much afraid that they are going to have a bunch of government bureaucrats and non-medical people cramming rules down their throats."



Appointments and honors

Mark H. Lepper heads Chicago Heart Association

Mark H. Lepper, M.D. has been elected president of the Chicago Heart Association. Dr. Lepper is dean of Rush Medical College and executive vice president for professional and academic affairs at Rush-Presbyterian-St. Luke's Medical Center.

Dr. Lepper is the former chairman of the Heart Services Council. He is a fellow of the American College of Physicians and the American Public Health Association, a director of the Institute of Medicine of Chicago, and a member of the American Federation for Clinical Research.

Dr. Lepper has directed the educational and scientific research program of Presbyterian-St. Luke's Hospital since 1966. He was also the co-author of the Lepper-Lashof report on the delivery of health care to Chicago's urban depressed areas.

He succeeds Kate H. Kohn, a graduate of the Rush class of 1935 and the first woman president of the Association. She is currently acting director of the department of physical medicine and rehabilitation at Michael Reese Hospital. Dr. Kohn was honored by the heart association for her services.

St. Anthony Hospital honors Francis L. Foran '17

Francis L. Foran '17 was recently honored by St. Anthony Hospital (Chicago) for 50 years of service. Dr. Foran is a Fellow of the American College of Physicians and clinical professor of medicine (emeritus) at Stritch School of Medicine, Loyola University of Chicago.

Dr. Foran has remained active in the research field at St. Anthony's. He is currently involved in a comparative study of the cardiographic records which were compiled during his term as head of the EKG department at the hospital.

He has contributed a number of articles to medical literature on the subjects of birth control and abortion, allergenic responses of tissues, and agranulocytic angina.

A native of Worcester, Massachusetts, he came to Chicago to enter Rush Medical College. In addition to his medical degree, he earned a master's degree in physiology at the University of Chicago.

Dr. Foran completed his internship at Cook County Hospital and served as a medical officer during World War I. He was a member of the Rush Medical College faculty and served as attending physician at Cook County for 27 years.

During 1947-49, he served as president of the St. Anthony Hospital medical staff. He is also a Diplomate of the Board of Internal Medicine.

Edwin Lennette '36 named Rush trustee; West coast alumni office opens

West Coast alumni have become increasingly active with the election of Edwin H. Lennette '36 to the Trustees of Rush-Presbyterian-St. Luke's Medical Center. A resident of Oakland, California, Dr. Lennette will serve a three year term.

The appointment of Dr. Lennette reflects the fact that nearly one-quarter of the 2,300 Rush Alumni live in California, Washington, and Oregon.

Dr. Lennette is chief of the Viral and Rickettsial Disease Laboratory of the California State Department of Public Health. He has also served as president of the American Association of Immunologists (1966-67) and the American Societies for Experimental Biology and Medicine (1968-69).

The Alumni Association has also announced the appointment of John S. Lancaster as its West Coast representative. Mr. Lancaster will assist Dr. Lennette in coordinating an alumni communications program, recruiting and evaluating student applicants, and establishing the Alumni Fund.

The Rush Medical College office is located at 105 Montgomery Street, San Francisco, California 94104, phone (415) 989-2076.

In February, alumni in Los Angeles and San Francisco met with John S. Graettinger, M.D., associate dean of student and faculty affairs, to discuss screening California area applicants.

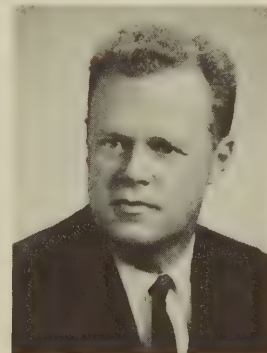
It is hoped that the alumni will play an important role in determining student qualifications. Of the 3,200 applicants for the 1972 Fall class, 430 were residents of the western states.

Among the alumni attending the meetings were in San Francisco: Louis Baer '38, Donald McGrew '37, Frank Van Kirk '38 and Dr. Lennette. In Los Angeles: H. Vern Soper '28, Harold Lincoln Thompson '24, Tom T. Watanabe '38, Thomas Y. Nakao '42, Paul McMaster '29, Finis Cooper '25 and Simon Shubitz '36.

Edwin H. Lennette



John S. Lancaster



Beatrice Tucker '22 has served as medical director of the Chicago Maternity Center for 40 years. On call every other night and every other weekend, she heads Chicago's only home obstetrical service.



Chicago's only home obstetrics program keeps Beatrice Tucker '22 busy around the clock

Outside it is a bitterly cold February day. Snow and slush cover the grimy streets around the Chicago Maternity Center located in an ancient, three story, brick building at the corner of Maxwell and Newberry streets. One block away is the famed Maxwell street outdoor market and the honky-tonk commercial district of Halsted street.

Inside the Center, the professional staff is going about the routine business of pre-natal and post-partum clinics and the paperwork of keeping track of the 100 home deliveries at which the Center personnel will assist during the month.

There is a sudden increase in the noise level as the Center's medical director arrives through the main entrance reporting as she goes on the outcome of her morning followup call. During the night, the Center staff provided emergency care for a young girl in her seventh month of pregnancy. They suspect the girl's mother tried to abort her. The medical director was double checking for infection.

As the spritely Dr. Beatrice Tucker enters the first floor office, she is reporting the antibiotics she had prescribed for the young woman. She is a tall, lithe woman with closely cropped, gray hair sticking out from under the black knit tossle hat that tops her off. Her sparkling eyes are emphasized by a modish pair of large, round, gold-framed glasses.

Dressed practically for the outdoors where she spends so much of her time, Dr. Tucker wears a bright red leather coat, knee-high boots, and a stylish two piece pantsuit. Pinned to her tunic is a large, yellow "smiley" face button which is so popular with the young people of today.

Anyone who knows that Beatrice Tucker received her degree from Rush Medical College in 1922 could easily estimate her age, but she insists that she doesn't want everyone to know how old she is. Age should not be important when you think of her. She is more active than many a younger person on her staff even though she has suffered hip trouble for a number of years and recently underwent a total hip replacement.

Dr. Tucker is devoting her life to keeping open the Maternity Center which makes more than 1,200 home deliveries a year and conducts daily obstetrical and gynecological clinics. She has been medical director of the clinic for 40 years.

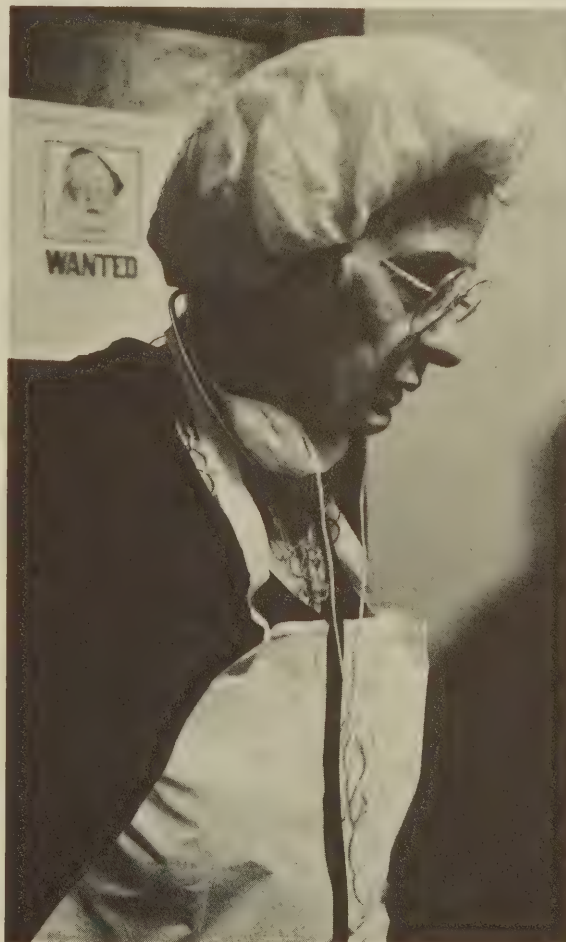
By 1974, the Maternity Center in cooperation with the obstetrics departments of Passavant and Wesley hospitals will open a new Women's Hospital and Maternity Center as part of Northwestern University's Chicago lakefront medical campus.

"I was supposed to retire at 65, but there is no one else to run the Center. I am interested in keeping it going until that new hospital is built," Dr. Tucker insists.

She hopes that the new hospital won't mean the end of her Maxwell street clinic because she feels that Chicago has a very definite need for a home delivery service, a function that the Center alone performs.

The high cost of hospitalization, the high cost of insurance, and a continuing, if not growing, desire of women to have natural childbirth are reasons she cites for the Center's continued existence.

"There are a lot of people who cannot afford to go to the hospital. Many women on relief could receive free hospital care but cannot leave their families. They don't have housekeepers available and they won't leave their children to enter a hospital," Dr. Tucker explains.





"Another group of women objects to the regimentation of hospital delivery. They want their husbands with them. They want to nurse their babies and don't want them placed in a nursery."

She urges hospitals to liberalize their regulations to permit husbands in the delivery room and allow natural childbirth if the mother wants it.

In addition to its clinic and home delivery services, the Maternity Center handles most of Chicago's home emergency obstetrical cases upon request of the police. Dr. Tucker estimates that the Center saves at least one maternal life a month and a large number of babies. The Center serves 250 square miles. Its staff travels in a fully equipped mobile unit and uses Wesley Hospital for emergency backup.

"It sounds like quite an area to cover but with the transportation available we are within 30 minutes of almost any case," Dr. Tucker says.

As medical director, Dr. Tucker oversees the entire operation of the Maternity Center. She also conducts clinics all day Wednesday and on Thursday afternoon. Her staff also includes a part time pediatrician and internist, a clinic director, one resident, three full time medical students, and three volunteer medical students, and an administrative nurse and head clinic nurse, a trained staff of registered nurses and licensed practical nurses.

She could use more help, but finds that the chairmen of many obstetrics departments fail to see the value of home obstetrics. She feels that the Maternity Center offers medical students and residents experience that is impossible to get elsewhere.

From her small apartment on the third floor of the Center, Beatrice Tucker is on-call every other night and every other weekend.

"When there is no one else to do the job, I do it," Dr. Tucker says. "I live here. I'm a consultant 24 hours a day, seven days a week."

Dr. Tucker's interest in obstetrics was sparked while at Rush by Dr. Joseph Baer and furthered by Dr. Joseph DeLee, the founder of the Maxwell Street Dispensary (now the Chicago Medical Center) and the Chicago Lying-In Hospital.

It was her father, however, who urged her into medicine. "He was really a medical quack," she admits candidly. He had received a correspondence school certificate as an optician and later branched out into medical practice on his own.

"He was dealing in what he called 'medical specialties,'" she recalls. "He was taking out cancers with a paste and selling pills for \$40.00 for what he called a course of treatment."

"We lived in Maine and he would practice with the farmers and simple people in the area. We really traveled with one foot ahead of the sheriff for a great deal of my early life. When it got too hot for him in Maine, he would go to New Brunswick, Canada."

Her father often took her with him on his calls. She remembers fitting glasses under the trees in an orchard, packing pills, and working with her father at his state fair exhibits.

"I really identified with him," she says. "He talked medicine to me all the time. I think he thought it would be nice to have somebody in the family with a medical degree. At nine years old, I had fully made up my mind to be a doctor and I went hell-bent from then on to do it."

By the time Dr. Tucker entered high school in Peoria, Illinois, the actuality of her father's profession was becoming apparent. This knowledge only increased her determination to become a doctor.





"I really went to medical school because I wanted status. I felt that I should make the family respectable and earning that medical degree was the only way I could do it. Fortunately, once I entered medical school I really liked it."

Twice during her training at Rush, Dr. Tucker dropped out of school. She was frustrated by the fact that her father was paying for her education with the money he earned by his dubious practice. She went to work as a chemist in a Chicago steel mill in order to earn money. Finally, Dr. Tucker's mother convinced her that her father was obligated to pay for her education and that it was not her concern how he made his living.

During her lifetime, Beatrice Tucker has become a pioneer in a number of ways. She was one of the few women to be accepted to medical school at a time when women were selected according to quota. She was the first woman intern at Evanston Hospital and one of the first unmarried women to adopt children. She has two adopted sons.

She was also the first woman resident at Chicago Lying-In Hospital. She remembers, "I really got that residency when Dr. Joseph DeLee (founder of the hospital) was on vacation. He didn't want a woman resident on his staff. While he was away, I convinced the man who was taking his place to accept me. When he returned he didn't think too much of the idea, but I won him over finally."

Following her three year residency, the same Dr. DeLee asked Dr. Tucker to be medical director of his Maxwell Street Dispensary. In 1932, she joined the staff and has been with it ever since.

When the new hospital and maternity center are built in 1974, Beatrice Tucker plans to retire. Her next project will be the passage of an "abortion-on-demand" bill by the Illinois legislature. In 1970 she lobbied for a bill which was defeated.

She says, "From my experience of 50 years in medicine, I really believe that people have the right to live and live well, and to be loved and cherished and taken care of. I see no reason why a man and woman and child should be caught up in the web of a biological accident which is going to change their entire lives."

If Beatrice Tucker attacks the problem of abortion with the same vigor she has shown in all the other projects during her life, Illinois will pass a legalized abortion bill.

Dr. Tucker lives by this credo, "There is one thing I can do . . . I really like to work. I like to take care of patients and I can work 24 or 48 hours at a stretch if I'm interested."

51 alumni and friends support college through Benjamin Rush Society

The Benjamin Rush Society now has 51 members providing major financial support for the reactivation of Rush Medical College. To date, gifts and pledges totalling \$550,000 have been made to the new school.

The trustees of Rush-Presbyterian-St. Luke's Medical Center have presented members of the Society with Benjamin Rush awards in appreciation of their outstanding support. The award is an attractive lucite sphere containing the traditional Rush Medical College seal inscribed with the appreciation of the Board.

The Benjamin Rush Society was founded in 1970 at the suggestion of R. Lincoln Kesler '35 as a means of establishing a substantial annual giving and bequest program for the school.

Membership in the Society is open to all alumni and friends of the College who signify their intent to contribute a minimum of \$10,000 within a period of ten years or through a bequest in their will. The pledge can be fulfilled in \$1,000 installments per year or in a single gift. It can be made in the form of cash, stocks, insurance policies, or a bequest in a will.

Alumni wishing more details about the Benjamin Rush Society should write: R. Lincoln Kesler, Benjamin Rush Society Chairman, 1725 West Harrison Street, Room 921, Chicago, Illinois 60612.



The Benjamin Rush award presented by the Board of Trustees to members of the Society.

Benjamin Rush Society Roster



Major support of the reactivation program of Rush Medical College is provided through membership in the Benjamin Rush Society. To date, the following alumni and friends have become members of the Society:

Norbert C. Barwasser '34
George B. Benson '32
Marcus T. Block '31
Henry P. Bourke '29
R. Gordon Brown '39
Helen Rislow Burns '26
George B. Callahan '26

James A. Campbell
Mrs. Jay Bailey Carter
Dr. and Mrs. Fred H. Decker '27
Frederic A. dePeyster '40
Dr. and Mrs. Norton J. Eversoll '21
Clark W. Finnerud '18
Malachi J. Flanagan
J. Will Fleming '38
Stanton A. Friedberg '34
Theodore H. Gasteyer '31
R. Kennedy Gilchrist '31
Theodore H. Goldman '29
Dorothy Grey '23
William J. Hagenah
Helen C. Hayden '28
Helen Holt '34
Clive R. Johnson '37
Edward S. Judd '37
Frank B. Kelly, Sr. '21
R. Lincoln Kesler '35
Francis L. Lederer '22
Donald McGrew '37
James W. Merricks '34

Clarence W. Monroe '33
Stanley E. Monroe '36
Edward S. Murphy '36
Thomas Y. Nakao '42
William H. Nicholson, Jr. '42
Harold A. Paul
Richard D. Pettit '37
Mr. and Mrs. L. I. Replogle
Albert F. Rogers '35
Mrs. Clyde E. Shorey
Dean F. Stanley '22
Donald G. Stannus '37
Jules C. Stein '32
W. Mary Stephens '32
Francis H. and
Elizabeth K. Straus '29
George W. Stuppy
Roy T. Tanoue '40
Donald T. Tarun
Samuel G. Taylor, III '32
H. Lincoln Thompson '24
Waltman Walters '20
Oliver M. Wood '32

Homecoming ceremonies mark reactivation of Rush Medical College

The reactivation of Rush Medical College was officially celebrated by the Alumni Association at a Homecoming banquet November 11 in Chicago. More than 400 alumni, students, faculty, and friends attended the dinner.

Homecoming day began at 10 a.m. with tours of the new Rush Medical College facilities. During the day 150 alumni and friends were invited to sit in on classes and meet with the first class of Rush students in more than 29 years.

Alumni were also invited to meet the chairmen of the major clinical departments of the College. Sessions were held with Theodore B. Schwartz, medicine, Harry W. Southwick, general surgery, Alfred P. Solomon, psychiatry, Joseph R. Christian, pediatrics, and George Wilbanks, obstetrics and gynecology.

The evening banquet, held in the Grand Ballroom of the Palmer House, was presided over by R. Gordon Brown, '39, president of the alumni association. Featured speaker was Frederic A. dePeyster '40 who traced the history of the distinguished medical school for alumni and newcomers.

The Benjamin Rush Society bestowed honorary membership upon James A. Campbell, M.D., president of Rush-Presbyterian-St. Luke's Medical Center. In announcing the award, Dr. Brown compared the rebirth of Rush Medical College to that of the Phoenix. He said,

"Because Rush on several occasions has risen from seeming destruction, especially from that of the great Chicago Fire of just 100 years ago, an analogy to the Phoenix legend is suggested. . . . There is, however, a difference of importance to mark here this evening. In the Phoenix mythology, the spectacular bird rose unaided from its ashes, reborn by its own mystical powers.

"No such magic operated in the successful re-founding of Rush. This was a very human endeavor, compounded equally of human head and human heart. To have our Phoenix up and flying in full feather while other medical schools projected at the same time are still chirping in the nest is a tremendous tribute to the movers and the doers here.

"We, alumni, recognize the work and the wisdom and, above all, the will that the reactivation of Rush required. We are pleased to acknowledge in small measure this accomplishment."

The presentation of the Benjamin Rush award was then made to Dr. Campbell by R. Lincoln Kesler, '36, chairman and founder of the Society.

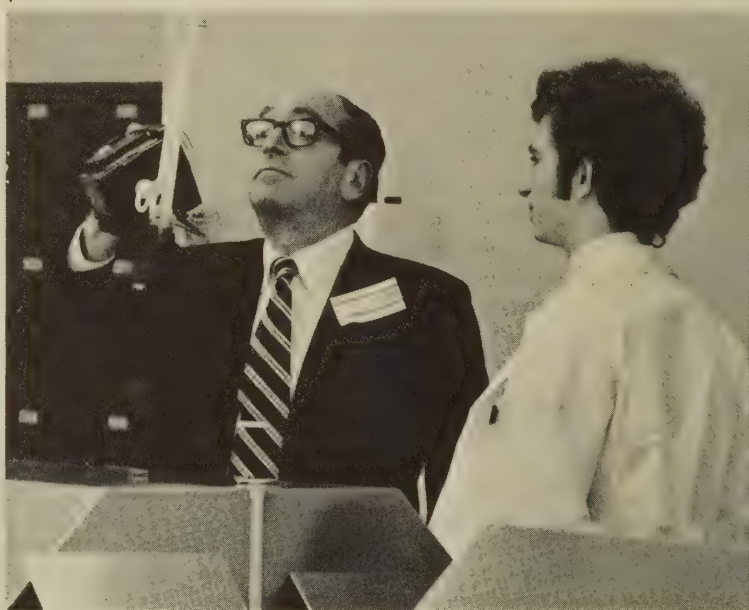
During the dinner, George B. Callahan '26 proposed a champagne toast to the new Rush Medical College and the first class of students in

whose hands the future reputation of the college lies.

Gifts totaling \$33,018.00 from the 50th anniversary classes of 1921 and 1922 were announced to the new school. Class chairmen for the anniversary campaign were Frank B. Kelly, Sr. '21 and Francis. L. Lederer '22.

In his concluding remarks, Dr. Brown said, "We have been honored tonight by the presence of many out-of-town alumni. They have come from both coasts and numerous points in between. To those who have so kindly come here to see what we are doing may I say, we pledge to you that the challenges facing Rush today will be met as handsomely as those of yesterday."

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1. Student Steven Sicher shows his father William Sicher '40 the latest lighting innovations in the new Rush gross anatomy laboratory.

2. Alumni toured the new multi-purpose laboratory while classes were in session.

3. Helen Holt '34 inspects a model of the brain which is one of many teaching devices available in the model room.

4. During "Meet the Chairman" sessions, Maurice P. Rogers '16 (left) discussed the general surgery program with chairman Harry W. Southwick, M.D. (right) and David Roseman, M.D.

5. Alumni and friends pour into the Grand Ballroom of the Palmer House for the reactivation banquet. Nearly 400 attended the ceremonies.

6. George B. Callahan '26 raises his glass in a champagne toast to the reactivation of Rush Medical College.

7. Class chairmen Francis L. Lederer '22 (right) and Frank B. Kelly, Sr. (seated second from right) acknowledge appreciation for the 50th anniversary gifts of their classes which amounted to more than \$33,000.00 donated to the new school.

After 40 years in show business Jules Stein focuses upon eye research



Jules Stein Eye Institute was opened in 1966 at U.C.L.A.

Jules C. Stein '21 is becoming synonymous with the finest in ophthalmic treatment, research and education although he has not practiced medicine in more than 40 years. Since 1960, Dr. Stein has led a renaissance in the science of ophthalmology, and has been cited by distinguished scientists for "infusing life and energy into the total field of ophthalmic research."

He recently was awarded Honorary Fellowship in the American Academy of Ophthalmology and Otolaryngology, in addition to honorary membership in the Association for Research in Ophthalmology. He has won the Migel Medal for distinguished service to the blind and the Humanitarian Award of Variety Clubs International for his work in the preservation of sight.

In 1921, Dr. Stein received his medical doctorate from Rush Medical College; however, most of his career has been focused upon the entertainment field. He is the founder and present chairman of the board of MCA Inc., (formerly the Music Corporation of America), parent company of Universal Pictures, Decca Records, and numerous business, real estate and banking enterprises.

Dr. Stein's show business career was almost unplanned. He played violin and saxophone in a number of bands to earn extra money while completing his medical education which included an internship and ophthalmologic residency at Cook County Hospital and a postgraduate studies in ophthalmology from the University of Vienna.

The music sideline quickly became a big business. As the dance band craze began to sweep the country, Dr. Stein was not only playing, but

booking other musical groups and performers. When he originated the sensationally popular concept of the "traveling band," it became evident that Dr. Stein could not conduct both a medical practice and a music career.

He retired from medicine in 1925 to found the Music Corporation of America, guiding its growth into the multimillion dollar enterprise now known as MCA Inc. At one time, before abandoning that phase of its operations, its offices represented 600 bands and 75 percent of the great entertainers including Edgar Bergen, Bette Davis, Clark Gable, Jack Benny and James Stewart. Today, MCA Inc. has 75 offices throughout the world. In California, Universal City is the world's largest motion picture and television studio. Dr. Stein continues to project his organizational and administrative abilities on a vast scale into all phases of its operation.

In 1960, Dr. Stein became involved once again with the field of ophthalmology. He established Research to Prevent Blindness, Inc. (RPB), a voluntary organization dedicated to the advancement of the field of eye research.

"Blindness is a challenge as immediate and critical as any in the field of medicine," Dr. Stein points out. "More than three million Americans suffer from serious, non-corrective defects. Almost one million people cannot read a newspaper, even with the aid of glasses. Some 350,000 among us have been declared legally blind. While the tools of modern medicine are extending the life span and giving life to thousands who would have once died in infancy, the rate of blindness continues at an alarming upward climb."

During the last decade more than \$19 million has been channeled into eye research by RPB. Annual unrestricted grants are being provided to more than 40 research institutions throughout the country. Four major eye research centers have been constructed and others are being developed. RPB research professorships, international scholars awards and other inventives are sparking the development of manpower for eye research.

It was through the leadership of Dr. Stein and his organization that the University of California constructed the Jules Stein Eye Institute, the largest and most functional ophthalmic center ever created at one time.

Ground was broken in 1964, and in 1966 the magnificent \$6,000,000 Jules Stein Eye Institute was dedicated, named by the Regents of the University in appreciation of Dr. Stein's leadership. Jules Stein, with his wife and family, contributed more than \$2,000,000 in personal funds to assure

its construction. Additionally, Dr. and Mrs. Stein personally directed the designing, planning and equipping of the building, and succeeded in raising more than \$4,000,000 in funds.

The Institute houses the UCLA eye clinics, inpatient facilities, surgical suites, and research laboratories. The eye clinics care for patients making more than 25,000 visits a year. Inpatient rooms have 60 beds, plus special pediatric and playroom facilities. Most important to Dr. Stein's organization in its search for causes and preventives of blinding diseases are the Institute's extensive laboratory facilities for research in ophthalmic anatomy, physiological optics, biochemistry, physiology, microbiology, immunology, and pathology.

At the dedication ceremonies for the Institute, Dr. Stein stated that he hoped "to create an edifice that will symbolize all that is medically and scientifically possible in the saving of sight in this golden age of medical progress."

A strong influence upon Dr. Stein's return to the medical field has been the encouragement and assistance of Doris, his wife of 44 years. He credits her with "rekindling my interest in ophthalmology." During the construction of the Stein Eye Institute, Mrs. Stein was active in the fund raising, planning, and furnishing of the building.

Dr. Stein contributed the reading room of the Institute in honor of his wife and furnished it with 18th century English antiques and oak paneling removed from a historic London building. The Steins have made a hobby of collecting English antiques and have one of the largest and finest collections in existence.

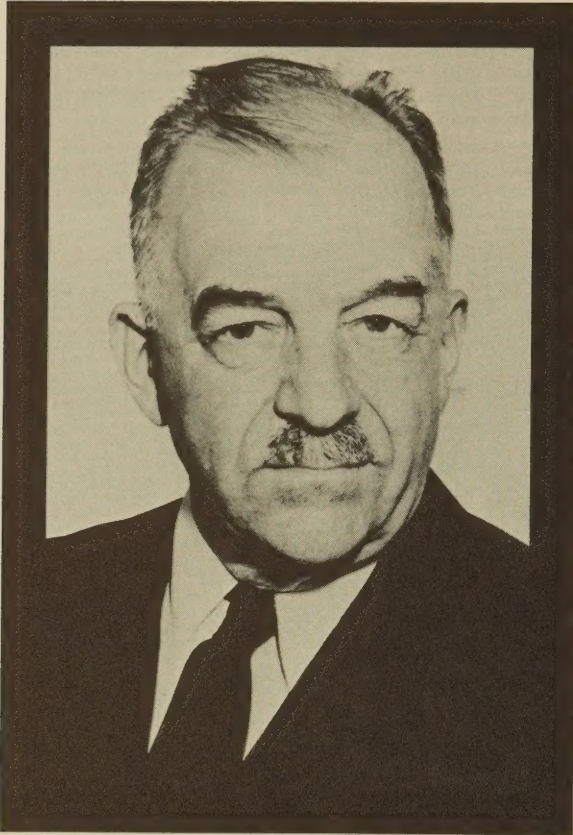
"If I am to be remembered in the years to come," Dr. Stein observes, "I believe my name will be associated more with ophthalmology and the preservation of sight than with the good fortune I have experienced in my business endeavors. Research and its resulting advances in medical and surgical sciences have been kind to me by adding many happy and useful years to my life."

"The advances in ophthalmology during the past 40 years have transcended those of all previous centuries, and yet we have barely started to understand the causes of 80 percent of all blindness. If it be true that blindness can be prevented, and if through our efforts we can preserve the sight of thousands, maybe millions of people, then I feel that my life has been well spent. And I thank God for giving me the extra time—past the proverbial three score and ten—to continue this mission."

Top: Dr. and Mrs. Jules Stein admire the sculptured ceramic tile mural covering one entire wall of the children's waiting room at the Jules Stein Eye Institute. Walt Disney's gift to the Institute, it depicts colorful figures of costumed children from "The Small World of Children" at Disneyland.

Bottom: Jules Stein (right) receives congratulations of his classmate Francis Lederer after receiving an honorary fellowship in the American Academy of Ophthalmology and Otolaryngology.





The following eulogy to Edwin M. Miller '13 was delivered by Francis H. Straus during memorial services at Rush-Presbyterian-St. Luke's Medical Center. Dr. Miller died February 4, 1972. At the time of his death, he was serving as chairman of the Rush Antiquities Committee and was preparing material for an historical museum.

Edwin M. Miller was born June 10, 1888 in Ida Grove, Iowa. His American predecessors go back to a seventeenth century settlement on the James River in Virginia. Like so many great physicians of his era, the rural background of his formative years was an important factor in his energy, his motivation toward excellence, and his concept of human life as only one element of the larger biological stream.

Dr. Miller graduated from the University of Illinois in 1910 and Rush Medical College in 1913. After internships in the Presbyterian and Cook County Hospitals he went abroad for further training in pathology and anatomy. He then returned to our hospital as an assistant attending surgeon and to the faculty of Rush Medical College.

For some of his early years, he was an associate of Dr. Dean Lewis. With the exception of his World War I years as a Captain in the 13th Gen-

eral Hospital and his years as Lieutenant Colonel and Chief of Surgery in the successor 13th General Hospital of World War II, the rest of his life was spent with us at Presbyterian-St. Luke's Hospital and Rush.

Not only did he contribute his life to us, he volunteered seven years of surgical service to the indigent in the Durand Hospital, nine years to the Children's Memorial Hospital and 27 years to the children's ward of the Cook County Hospital.

With the progression of years, recognition of his devotion and his skills was inevitable. He advanced in academic rank to clinical professorship. He advanced through all the grades of hospital rank to six years as Chairman of the Department of Surgery in our hospital (Presbyterian Hospital). He published 66 articles in medical journals. There was parallel recognition by his surgical colleagues. Successively he was elected to membership in the local, the regional, the national and international surgical societies.

Fifty-two years ago, I came to the Presbyterian as a first year resident. Dr. Miller was then a very junior member of the staff. I assisted him with operations—usually in the afternoon when more important surgeons did not need the operating rooms. During the summer, the same more important surgeons would yield to him the "Big Clinic" with its accompanying responsibility for care of the service patients, and I worked under his direct tutelage.

Through the subsequent years I became his friend and still turned to him for he always freely proffered counsel. I and his other friends often referred to him as "Silent Ed Miller" because he would not talk unless he had something useful to say. I believe I owe my life to his insistence, to me, and to the United States, that I be thrown out of New Guinea and the Army. He was not silent on that occasion.

It is not fitting that we regret the passing of a long life, lived fully and fully appreciated and recognized by his patients, his colleagues and his country. It was lived completely and there was nothing left. We can recall that a few days before he left us he visited the staff room and talked to me and many other friends with memory and faculties intact. We can rejoice that the end came suddenly and without suffering.

But we can and do mourn the loss of a friend. We can regret the absence of a friend of strong character and wise counsel. We do extend our sympathy to Blanche Miller, their four children and their seventeen grandchildren. We have all lost something precious. Their loss is the greater.

In Memoriam

Ralph T. Smith '00
Nelson Edgar '02
Frank W. Pope '03
William G. Reeder '03
George W. Blatherwick '09
Everett L. Goar '09
Arthur N. Kitenplon '10
John M. F. Heumann '12
Edwin M. Miller '13
John H. Bridenbaugh '14
Gustave W. Lawson '14
Frederick N. Bjerken '15
Robert R. Glynn '15
Robert H. Henderson '15
Frank R. Menne '15
Angus L. Cameron '16
John B. Doyle '17
Leland C. Shafer '17
Peter A. Lommen '19
George W. Mills '19
Albert G. Peters '19
Henry R. Powers '19
Harry J. Isaacs '20
Melvin P. Baker '21
Henry C. Niblack '21
Alvia Brockway '22
Raymond Householder '22
Millard C. Hanson '23
Gilbert J. Schwartz '23
Virgil Wipperf '23
Earl S. Carey '24
Emerson Gillespie '24
Russell H. Miller '24
Alvah L. Newcomb '24
Frank V. Theis '24
Homer H. Whitney '24

Robert L. Belt '25
Owen H. Homme '25
Michael L. Leventhal '25
Clarence O. Heimdal '26
Mabel G. Masten '26
Arthur C. Sudan '26
Burr C. Boston '27
Frank H. Comstock '27
Donald K. Hibbs '27
Bellfield Atcheson '28
Roland P. Carter '28
George Koivun '28
Arthur Stenn '28
Rodney C. Wells '33
Louis Berger '35
L. Henry Kermott '35
Paul T. Lambertus '35
Garnet B. Bradley '36
William H. MacDonald '37
James H. Williams '37
Raiford D. Baxley '40

